



01919 U.S.PTO  
022604

Atty. Dkt. No. 065905-0312

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

22387 U.S.PTO  
10/7896415  
022604

Applicant: Tetsuya SADOWARA

Title: IMAGE FORMING APPARATUS AND METHOD FOR VISUALLY DISPLAYING IMAGE DATA OF VARIOUS DATA FORMATS

Appl. No.: Unassigned

Filing Date: February 26, 2004

Examiner: Unknown

Art Unit: Unknown

**UTILITY PATENT APPLICATION**  
**TRANSMITTAL**

Mail Stop PATENT APPLICATION  
Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Tetsuya SADOWARA

Enclosed are:

- [ X ] Specification, Claim(s), and Abstract (14 pages). *(and cover sheet)*
- [ X ] Formal drawings (3 sheets, Figures 1-3).
- [ X ] Declaration and Power of Attorney (4 pages).
- [ X ] Assignment of the invention to KABUSHIKI KAISHA TOSHIBA and TOSHIBA TEC KABUSHIKI KAISHA.
- [ X ] Assignment Recordation Cover Sheet.
- [ X ] Information Disclosure Statement.
- [ X ] Form PTO/SB/08 with copies of 2 listed reference(s).
- [ X ] Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
<b>Basic Fee</b>					
Total Claims:	11	- 20	= 0	x \$18.00	= \$0.00
Independents	3	- 3	= 0	x \$86.00	= \$0.00
If any Multiple Dependent Claim(s) present:			+ \$290.00	=	\$0.00
			SUBTOTAL:	=	\$770.00
[ ] Small Entity Fees Apply (subtract ½ of above):				=	\$0.00
			TOTAL FILING FEE:	=	\$770.00
Assignment Recordation Fee:			+ \$40.00	=	\$40.00
<b>TOTAL FEE</b>				=	<b>\$810.00</b>

A check in the amount of \$810.00 to cover the filing fee and fee for recordation of Assignment is enclosed.

The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

By \_\_\_\_\_

Pavan K. Agarwal  
Attorney for Applicant  
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Date February 26, 2004

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